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<b>POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM</b>	Application Number		10/584720	
	Filing Date		12/22/2004	
	First Named Inventor		Gebhardt	
	Title	PROCESS FOR THE PREPARATION OF TRIAZOLOPYRIMIDINES		
	Art Unit			
	Examiner Name			
Attorney Docket No.		64,957A		

I hereby revoke all previous powers of attorney given in the above-identified application.

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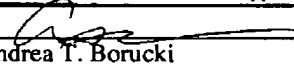
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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	01/18/2008
Name	Andrea T. Borucki	Telephone	317-337-4820
Title and Company: General Patent Counsel, Dow AgroSciences LLC			

**NOTE:** Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 2 forms are submitted.